

OPEN MEETING MINUTES

Name of Governmental Body: Children's Long-Term Support Council			Attending: Liz Hecht, Chairperson; Patti Becker, Kelly Blaschko, Mitch Hagopian, Lisa Hanks, Chris Hanten, Pamela Hencke, Wendy Heyn, Barb Katz, Katy Morgan-Davis, Cherie Purdy, Lisa Stephan, Beth Swedeen, Sandra Tierney, Maddie Valent Absent: Nissan Bar-Lev, Kristal Knudtson, Angela Radloff, Walt Schalick Public Attendies: Vicky Gunderson DHS Staff: Deb Rathermel, Becky Granger, Kate Johnson, Dan Kramarz, Sue Larsen, David Sorenson, Kat Van Hampler, Carrie Dalgetty, Jessica Holland, Kevin Coughlin, Donnie LaBarre, Kelsey Vincent, Beth Gullickson, Maureen Thomas
Date: 1/12/2022	Time Started: 9:00 a.m.	Time Ended: 2:30 p.m.	
Location: Zoom Conference Call			Presiding Officer: Liz Hecht, Chair
Minutes			

Operational:

- Approval of October 13, 2021 Meeting Minutes



CLTS October 13
2021 Draft Meeting

- Motion to approve by Barb Katz and seconded by Patti Becker; motion passed unanimously.
- Membership Status and Recruitment Efforts:** Currently the Council has four openings: one provider position and three parent positions. Parents on the council are asked to mentor and recruit new members. There was a brief discussion about recruitment:
 - Parents on the council are able to claim mileage or overnight lodging costs, but other reimbursement or stipends are not provided. It is statutorily prohibited to pay parents in this way, but BCS will look into this more.
 - The Bureau of Children's Services (BCS) will place a call-out to parents in the *All in for Kids* Newsletter and also place a call-out in the provider bulletin.
 - BCS has a summary membership recruitment message it shares with council and others to share with potentially interested individuals.

Public Comment: none

Council Member Updates and Announcements

- The Board for People with Developmental Disabilities (BPDD) is hosting a *Supported Decision-Making* workshop on February 18. There are a number of Children's Long-Term Support (CLTS) Support and Service Coordinators (SSCs) signed up.
- Milwaukee County has realigned units within Milwaukee Department of Health Services (DHS). Milwaukee DHS is now divided into children's systems and adult's systems. CLTS is now within the children youth and family services with all other programs that serve children. Updates to the Milwaukee County website are upcoming.

Briefings

Waiver Renewal Approved

- DHS received approval from the Centers for Medicare & Medicaid Services (CMS) for its CLTS Program in December of 2021, and the updated waiver is effective on January 1, 2022, through December 31, 2027.

- The [CLTS Waiver Renewal](#) webpage contains a [summary of changes](#) and public information
- Implementation planning: This will be an iterative and ongoing process, and it will take time to update policy and recruit providers.
 - Planned changes:
 - February: CLTS Manual changes and updates to reflect new services and policy changes.
 - February: Provider registration forms updates.
 - Rate schedule and crosswalk changes were published and effective January 1, 2022.
 - Communication:
 - The waiver renewal has been an ongoing topic during the CLTS monthly teleconferences.
 - Special teleconferences are planned for both county waiver agencies (CWAs) and providers in February.
 - This topic was also featured in the [All in For Kids newsletter](#).
 - BCS will be providing outreach to providers via teleconference and provider bulletins.
 - Questions and Discussion:
 - Physical restraints and isolation will not be allowed within the CLTS Program. This includes when CLTS participants are receiving respite in a residential respite environment.
 - CMS denied allowing the payment of internet services for items that require internet access.

Enrollment Data- Racial and Ethnic Demographics



CLTS
_RE_Enrollment_Ana

- As part of the BCS Racial Health Equity Initiative, BCS is gathering baseline race and ethnicity data about program enrollment and experience.
- The data presented illustrates key baseline findings from CY 2020 for CLTS participants.
- This information will be used to develop hypotheses and improvement efforts.
- Discussion: The Council would appreciate more data on a county by county basis. The Council would also like to see BCS consider Medicaid data specific to race and ethnicity even though that data set may be imperfect.

BCS Program Access Phase I Status

- The 2019-2021 State of Wisconsin Budget signed by Governor Evers included a charge to standardize the process of intake, eligibility and enrollment for children's programs statewide.
- Three areas of standardization were identified: Standardized materials, a statewide referral and intake system, and a professional development/quality assurance system.
- Status of the key aspects of the initiative:
 1. Standardize Materials (Phase I): All materials are currently published and can be accessed on the DHS website.
 - A [memo](#) was released to CWAs
 - A special teleconference will be held on January 25, 2022 to review materials and expectations for use.
 - Videos: Voice overs for these videos are currently being completed, and these should be available soon.
 - All programs must use the standardized materials by March 1, 2022.
 2. Statewide referral and intake system: \
 - The Children's Program Intake Program (CPIP) is currently being utilized by the Katie Beckett program. The plan is to expand this software program to the CLTS Program and the Children's Community Options Program (CCOP).
 - This system will encourage consistency and create the ability for BCS to oversee intake functions.
 - This system is tentatively scheduled to be ready by July 2022. BCS will be engaging with counties to provide updates about the system prior to rollout.
 3. Professional Development/Quality Assurance: This work will be included into the next phase of this initiative, Launching Access.
- American Rescue Plan Act (ARPA) funding will allow the initiative to progress to the next step. A project manager has been specifically brought on board to facilitate this initiative.

Launching Access Intro (Phase II):



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- The Council discussed questions, the scope of the project and what level of advisory is needed for this effort.
 - The council appreciates that this proposal is moving forward with ARPA funds.
 - The council recommends that the project scope takes into account cross-program coordination.
 - March of 2024 is the deadline to spend ARPA funding allocated to this initiative.

Key Activities, Discussion:

- Branding and Marketing:
 - Will need to think through branding and marketing in the context of other resource entities like Children and Youth with Special Health Care Needs (CYSHCN) Regional Centers and Well Badger Resource Center.
 - Branding needs to be in a language that parents/families understand and needs to connect to other professionals that families interact with.
 - Branding should inspire community inclusion.
 - Conducting a family focus group would help with branding efforts and would also assure that branding resonates with families from all cultures.
 - Branding and marketing will only go so far if the system itself is still complicated and cumbersome.
- Strengthening partnerships:
 - Various different entities will need to have common expectations and training.
 - Memoranda of Understanding (MOUs) should define and explain terms in common language, like “respite.”
 - Partnerships should reduce the need for families having to tell their stories multiple times, and should encourage “warm handoffs.”
 - Would like to see the inclusion of Department of Children and Families, such as foster care and special needs adoptions.
 - Should pull from best practice. Are there counties or agencies that are doing this well?
- Leverage technology:
 - Could be a hub for families to explore and get information online.
 - Technology would be a critical component and should work alongside the care coordinator or navigator as they work directly with families.
 - Need to be aware of limitations of literacy, including technology literacy, in the development of an app or web-based portal.
- Additional feedback:
 - The project needs to consider how to fund ongoing operations beyond ARPA funding.
 - It would be helpful to have further data collection to support how this solution works and why.
- Next steps: Establish an advisory committee and determine the scope of that committee, focus groups that could provide specific feedback.

Status Updates:

- Electronic Visit Verification (EVV) Status:
 - EVV is required by CMS for Medicaid (MA) personal care services. CLTS does not cover services that would be subject to EVV. However, CLTS participants are subject to these requirements for certain MA services outside of the CLTS Program.
 - The soft launch for this initiative has been extended, with an end date to be announced. The soft launch phase started November 2, 2020.
 - [Website for EVV status and updates](#)
 - [Website for members](#)
 - [Forward Health Update](#)
 - Council feedback: A letter sent to families made it sound like there was going to be a service that was getting taken away. Council is concerned that families are being put in a role where they are assuring that the

providers are compliant so they can keep their services. Recommended that EVV is a subject in All in for Kids. BCS will bring Council's feedback to the EVV team.

- ARPA 5% rate increase for Home and Community-Based Services (HCBS) providers
 - Rate increase occurred January 1, 2022, to address direct care workforce and strengthen participants' access to services.
 - The rate increase was provided to all CLTS services within the rate CLTS rate structure.
 - The CLTS Rate Schedule and Crosswalk have been updated to reflect this change.



HCBS ARPA
Increase.pdf

- ARPA HCBS Workforce Initiatives:
 - Goals of this project: Improve caregiver competencies, create a pathway for advancement, increase the number of direct care workers and improve accountability and sustainability.
 - The project promotes an opportunity to address systemic workforce issues.
 - Desired outcomes include: more choice for those needing care, improved HCBS initiatives, decreased reliance on the long-term care system and institutional care options as well as potential cost savings.
 - This will affect the HCBS programs including CLTS, Family Care, Family Care Partnership, IIRIS, and PACE.



CLTS_Council_-_ARP
A_Workforce-20220'

Break: 12:25-12:50pm

Council Member Sharing and Discussion:

- Provider agencies and families continue to have a hard time finding staff and caregivers.
- Family Voices continues to work on videos for families to provide information regarding supported decision making and created [supporting materials](#) for the Birth to 3 Program statewide child find campaign.
- The Disability Determination process continues to be very long and difficult for families to navigate.
- The Early and Periodic Screening, Detection and Treatment (EPSDT) process still appears to be difficult for families and providers to navigate. This is presenting issues getting coverage under the CLTS Program.
- Families still struggle with transitioning to adult long term care. Some local programs are looking specifically at transition issues.
- Counties continue to see high enrollment growth.

CCOP Survey Results and Next Steps:



2022 CCOP
Operational Survey !

- In October 2021, BCS issued a survey to County CCOP agencies regarding their 2022 operational plans.
- Council would be interested to have additional information on the financial impact, for example the dollar amount that goes towards family services vs a county's required Maintenance of Effort (MOE).
- Council would also like information from families to discern what needs are not being met that could be accomplished with CCOP.

COVID Unwind Federal and State Implementation Status and Decisions

- The federal government is the entity that determines the end of the Public Health Emergency (PHE), which is expected to end sometime in 2022.
- A big detail of PHE unwinding, or phasing out of policies and flexibilities allowed during COVID-19, is assessing CLTS eligibility, MA access and enrollment for participants. CLTS will need to resume functional screen re-evaluations when the PHE ends.
- BCS is currently working on developing various communications to families and counties about the unwinding process.

- CLTS also has flexibilities via the K Waiver approved by CMS. States are allowed up to six months to transition to permanent policy after the PHE ends.

START Project and Advisory Committee Representation

- DHS has contracted with an entity named START to conduct a statewide assessment and analysis of the crises response systems in Wisconsin. This assessment specializes in addressing Mental Health services for individuals with intellectual and developmental disabilities (IDD).
- DHS is currently recruiting members to participate in focus groups and would like representation from the council.
- START will make recommendations to DHS in approximately May of 2022.

CLTS Council 2022 Meeting Dates: April 13, July 13, and October 12**Motion to Adjourn:**

Motion to adjourn by Patti Becker and seconded by Lisa Stephen; motion passed unanimously

The Council meeting adjourned at 2:30 pm.

Prepared by: Beth Gullickson on 1/12/2022.

These minutes are in draft form. They will be presented for approval by the governmental body on: 4/13/2022